**PATENT** 

Attorney Docket No. MTI-31041-A

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Ping, et al.

Serial No.

10/046,497

Filing Date

October 26, 2001

For

Method For Forming Raised Structures by Controlled Selective

Epitaxial Growth of Facet Using Spacer

Group Art Unit

2814

Examiner

LE, Thao X.

Confirmation No.

8624

### CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10

I hereby certify that, on the date shown below, this correspondence is being:

Mailing

deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231

37 CFR 1.8(a)

37 CFR 1.10

□ with sufficient postage as first class mail ■ As "Express Mail Post Office to Addressee" Mailing Label No. EV 264092447 US

Transmission

transmitted by facsimile to Fax No\_ addressed to Examine

iner at the US Patent and Trademark Office

Date: 2/20/03

**Assistant Commissioner for Patents** 

Washington, D.C. 20231

#### **TRANSMITTAL**

1. Transmitted herewith is:

Response (19 pages)

Replacement sheets for Claims (27 pages)

Blacklined version of Claims (28 pages)

Check in the amount of \$2,868.00 (excess claims fee)

Return Postcard

#### **STATUS**

2. Applicant is a large entity.

TECHNOLOGY TO PETER SON

777973v1





#### EXTENSION OF TERM

- The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.
  - [X] Applicant believes that no extension of term is required. However, if an extension of time is required, please consider this a petition therefor.
  - [ ] Applicant petitions for an extension of time under 37 C.F.R. '1.136 for the total number of months checked below [fees: 37 C.F.R. '1.17(a)(1)-(4)]:

[ ]	Extension (months) one month two months three months	<u>small</u> \$ \$ \$	or other than entity 110.00 390.00 890.00 1,390.00	Fee fo <u>small</u> \$ \$ \$ \$	
[]	four months	\$	1,390.00	ን Fee:	\$0.00

# FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Claims Rema After Amenda			Highest Number Previously Paid For		Rate (Small Entity)	Additional Fee or	Rate (Large Entity)	Additional Fee
Total	117	Minus	93	=	x 9= \$	\$	24 x 18	\$ 432.00
Independent	42	Minus	13	=	x 42= \$	\$	29 x 84	\$2,436.00

FIRST PRESENTATION OF MULTIPLE DEP CLAIN	FIRST	PRESENT	ATION O	F MULTIPL	E DEP	<b>CLAIM</b>
--	-------	---------	---------	-----------	-------	--------------

TOTAL ADDIT. Fee \$

or TOTAL ADDIT. Fee \$2,868.00

- c. [ ] No additional fee for claims is required.
- d. [X] Total additional fee for claims required \$2,868.00

## FEE DEFICIENCY

5. If any additional extension and/or fee is required, charge Account No. 23-2053. If any additional fee for claims is required, charge Account No. 23-2053.

Date: February 20, 2003

Kristine M. Strodthoff Reg. No. 34,259

Whyte Hirschboeck Dudek S.C. 111 East Wisconsin Avenue Suite 2100 Milwaukee, WI 53202 (414) 273-2100 Customer No. 31870

MKE/777973.1